DISCLOSURE SUMMARY PAGE COMMITTEE NAME (Must be some as on Statement of Organization) Windtenum of Fox. C. t. L. Council. IMPORTANT: indicate type of committee you are reporting for. (1) (1) Statement ageistive Conditions (2) Statement of Organization) IMPORTANT: indicate type of committee you are reporting for. (1) (1) Statement ageistive Conditions (2) Statement of Organization (3) (2) Statement ageistive Conditions (2) Statement of Organization (3) (3) Statement ageistive Conditions (2) Statement of Organization (3) (3) Statement ageistive Conditions (3) Statement of Organization (3) (3) Statement ageistive Conditions (3) Statement of Organization (4) Statement (4) S	FOR INSTRUCTIONS, SEE BACK OF FORM			
COMMITTEE NAME (Must be same as on Statement of Organization) Winter In 6 Fox City Council Winter In 6 Fox City Council MPORTANT: Indicate type of committee you are reporting for: 1/2 (1) Statement elegistishe Candidate (2) Statement PAC (3) State Party (4) County/Local Candidate (6) County PAC (6) Ballot Issuefranchise Committee (7) County/Local Candidate (6) Support State of Candidate (6) Support State of Candidate (7) County/Local Candidate (8) Support State of Candidate (9) Support State of Candidate (1) County/Local Candidate Name CANDIDATE COMMITTEES ONLY: Candidate Name Office Sought WAR 4 Council Late filed reports are subject to possible civil and criminal penalties. SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: 1 AM FILING A 17 REPORT FOR ANIA (1) ELECTION (2) NON-ELECTION YEAR (report date) Check if this is final (termination) report and attach Notice of Dissolution is filed.) Check if this is final (termination) report and attach Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND	/ ADMINISTRATES	e on the	FORM	
MINITERIOF FOR CITY COUNTY AND STATEMENT OF FOR CITY CONTINUES. PART (1) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reports and at tack on the last reporting period, or must be zero if this is find (termination) or the reports until a Notice of Dissolution is filed.) CASH ON HAND at the beginning of the reports until a Notice of Dissolution is filed.) CASH ON HAND at the beginning of the reports until a Notice of Dissolution is filed.) CASH ON HAND at the beginning of the reports until a Notice of Dissolution is filed.) CASH ON HAND at the Degrand of the reports until (Attach Schedule F). CASH ON HAND EF. Loans Received total (Attach Schedule F). Schedule F: Loans Repayments total (Attach Schedule F). CASH ON HAND at the end of this reports period (finis is period). Schedule F: Loans Repayments total (Attach Schedule F). Schedule F: Loans Repayments total (Attach Schedule F). CASH ON HAND at the end of this reports period (finis is period). Schedule F: Loans Repayments total (Attach Schedule F). Schedule F: Loans Repayments total (Attach Schedule F). Schedule F: Loans Repayments total (Attach Schedule F). CASH ON HAND at the end of this reports period (finis in report, balance must be zero) (Attach DR-3). Schedule F: Loans Repayments total (Attach Schedule F). CASH ON HAND at the end of this reporting period (finis in report, balance must be zero) (Attach DR-3). Schedule F: Loans Repayments total (Attach Schedule F). CASH ON HAND at the end of this reporting period (finis in report, balance must be zero) (Attach DR-3). Schedule F: Loans Repayments total (Attach Schedule F). CASH ON HAND at the end of this reporting period (finis in report, balance must be zero) (Attach DR-3). Schedule F: Loans Repayments total (Attach Schedule F). CASH ON HAND at the end of this reporting period (finis in report, bala	COMMITTEE NAME (Months and Cold of Col		Na Bonnani I	
County Pac (6) Ballot issue/Fanchise Committee Pac (3) State Pact () County/Local Candidate (6) Support State of Candida	WINTERPOF FOR CITY COUNCIL 2007 OCT 26	PM I.	F-0	NET ORT
Caped in	IMPORTANT: Indicate type of committee you are reporting for:	' ' '	Comm. #	nly
(s) Supent State of Candidate (17) (s) (
CANDIDATE COMMITTEES ONLY: Candidate Name GARY L. Winterhoff Office Sought WARL 4 CounciL Late filed reports are subject to possible civil and criminal penalties. SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A JI-LOT REPORT DATED Creport date) Indicate one Creport date Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) SCHEDULE: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule A: Cash Contributions total (Attach Schedule A) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) SUB-TOTAL\$ 1, 714.98 SUB-TOTAL\$ 1, 714.98 SUB-TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) Schedule B: Expenditures total (At	(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee		Scanned	
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Late filed reports are subject to possible civil and criminal penalties. SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A	Office Sought District (if Senate or House)	.	•	
Late filed reports are subject to possible civil and criminal penalties. SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A	WARD 4 COUNCIL	'		
Late filed reports are subject to possible civil and criminal penalties. SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: 1 AM FILING A				
Late filed reports are subject to possible civil and criminal penalties. SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: 1 AM FILING A	_ Kobert (1 Brown (319) 266-506	62	101	24/09
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A	SIGNATURE OF TREASURER (or person filing this report) TELEPHONE		DATES	IGNED
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: I AM FILING A	Late filed reports are subject to the state of the state			
Indicate one Indic			penalties.	
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Schedule F: Loans Received total (Attach Schedule F) 300. — Schedule H: Total Sales of Campaign. Property (Attach Schedule H) — 0 — (Schedule H applies to Candidates' Committees Only) SUB-TOTAL 5 /, 7/4.98 SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 1, 2/2,66 Schedule F: Loan Repayments total (Attach Schedule F) — 0 — CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)			141	4.98
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Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	SUBTRACT TOTAL MONEY SPENT THIS PERIOD	~L 4		114.48
Schedule F: Loan Repayments total (Attach Schedule F)		ow)	1	212.66
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$		-		
be zero) (Attach DR-3)				
	be zero) (Attach DR-3)	\$		502.32
	**[INPAID BILLS (From Schedule D., Attach Schedule D)			

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$

YES NO

300. -

For	Instructions,	See	Back	Ωf	Form
	mondenons,	266	Dack	O1	LOHIII

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same	e as on Statement of Organization)
WinterhoF For City	COUNCIL

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF IDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE). LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC IO NUMBER	NAME AND ADDRESS OF THE PARTY O			
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (if applicable)	AMOUNT RECEIVED	FUND RAISEI INCOM
9/2/	10# TRANSFERE	GARY L WINTERHOFF			
9/24/07	CK# From SA-UIL	1220 WASHING TOAL		S	
70.7	_1	Cedar FAlls IA SDU13	SAME	150 -	
9/24/07	ID#	ROBERTJ. + Judith E. BROWN			
124/1	CK#	4315 Sterling lane			
101	CK# 173	CELAR FALLS IA 50613	NONE	100.	
101	ID#			-	
10/3/07	CICI			24100	
1-7	CK#		NONE	24.99	
1-1	10#			 	<u> </u>
10/31				246	
10/3/07	CK#		NONE	24.99	
	ID#	MATTHERE			
10/3/07		MATTHEWT. + JENNIFER A. REISETTER			
107	CK# 38.89	CedARFALLS IA 50613	NONE	40	
	ID#	NA LAA			
10/3/		DAVIDM. + LORI R. NORDYKE 3512 W. 18+ ST			
10/3/07	CK# 3106	0512 W. 12+ ST	NONE	100 -	
	ID#	CEDAR FAILS IN 20013	Nowe	700.	
10/9/07	10#	JOHN P. OR SUE L. HLA-S			
11/07	CK# 3197	5414 MEADOWLARK LANE	NONE	100	
	10#	CELAR FALLS, IA 50613	NOUNE	700.	
10/10/07		GARYL + KIM A. WINTERHOF			
1967	CK# 1189	1220 WASHINGTON	_ 5.	1000	
	10.0	CELAR FAMS IA 50613	SAME	150	
10/10/07	ID#	JEFFREY A. OR BRENDA L. KOCH			•
107	CK# 8855	5709 N. UNION Rd		10.	
		CECAEFAlls IA 506/3	NONE	100	
10/10/	ID#	DAVID P. + JONI E. KREICHI	-		
14/14/07	CK#	1004 PARKWAY AVE.		20	
	CK# 2344	CEDANFAILS IA SUG13	NONE	250,-	
			SUB-TOTAL	226.55	
			1	\$ 739.98	

TOTAL (if last page of this schedule) \$

Page / of 2 (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be snown to the third degree of consanguinity (blood relatives) and affinity (relatives by marnage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

i	\neg
COMMITTEE NAME (Must be same as on Statement of Organization) Winterhof For Council	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
CHE	CK THIS BOX IF IDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE). LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (if applicable)	AMOUNT RECEIVED	FUND RAISE INCOM
10/24/07	ID#	Ed + SHERRY BROWN 9030 BEAVER VALLEY Rd.	Mari	\$	1400
101	1033303988 ID#	CEDAR FAILS IN 50013-9460	NONE	100.	ļ
10/24/	CK# 1783	DEAN A OR CYNTHIA M. Gipp 4325 BRIARWOOD OR CEDST FALLS IS 50613	NONE	25	
10/24/	ID# CK# 2531	William P& Bobby & A. CAllahan 1210 SUNNYSIDE CIRCLE CE LAR FAILS, IONS 50013	Nows	100	
10/24/07	ID# CK# 1196	JAMIE THOMPSON 7521 POPLAR LANG CELAR FALLS IA. 50613	NONE	a 50, -	
10/24/07	ID# CK# 5/24	BECKY K. OR JIMA MUDD II 3208 STRATFORD COURT CEDAR FAILS IN SOU13	NONE	200. –	
	ID# CK#	= 38 - 13 - 14 - 14 - 14 - 14 - 14 - 14 - 14			
	ID#				
	CK#				
	ID#	· · · · · · · · · · · · · · · · · · ·			
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	(77	

TOTAL (if last page of this schedule) \$ 141

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2 (for Schedule A)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME	(Must be same as on	Statement o	f Organization)

WinterhoF For Counci	_
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00.0	ILRNO!	<i>51.</i> 2		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/2/07	ID# CK# /00/	WAL MART 525 BRANDILYNN BLUD CEDAE FAlls IA SOGI3	THANK YOU NOTES	\$ 425
10/3/07	ID# CK# 1002	GARY WINTERHOF 1220 WAShINGTON CELAR FAMES, IS	Reimbursed GARY Voter List 20 Brochutes 53.50	73
10/4/07	ID# CK# <i>100</i> 3	Copy WURKS 2227 COLLEGE St CELAR FALLS, IA SOUIS	BROCHURES	10700
10/4/	ID# CK# <i> 004</i>	GARY WINTER HOF 1220 WASHINGTON CELAR FALLS IN 50613	Reimbursed GARY Brochuees	4/73
10/9/07	ID# CK# /005	CEDAR FAILS TIMES 315 MAIN ST CELAR FAILS IN 50613	Ad For paper	163
10/14/07	ID# CK# /oos	GARY WINTERHOF 1220 WASHINGTON CE GIR FALLS IA 50613	Signs 237- Stamps 8.20 Ad 163.80 404	409
10/14/67	ID# CK#/067	CEDAR FAILS TIMES 315 MAIN St CEDARFALLS, IN 50613	Ad	16380
10/24/07	ID# CK# 1008	GARY WINTERHOF 1220 WASHING TON CEDURFALLS IA 50613	Reimbursed GARY 100 BROCHURES Color 250 Brochures - NON-Color	963.0 8 144.45
			SUB-TOTAL	\$ 1107.53

TOTAL (if last page of this schedule) \$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule Ginstructions and Iowa Code 56.6(3)(i).)

Page	1	αf	2
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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
B (Rev. 09/97)	MONETARY EXPENDITURES
	CK TING BOWE

CHECK THIS BOX IF AMENDING FORM

COMMITTE	E NAME (Must be:	same as on Statement of Organization)		
Win	TENHOF FR	on Council		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/24/07	ID# CK# / <i>U09</i>	SIGNS + DESIGNS 5600 NURCIC OR CELARPAlls IA 50613	3 18"x24" Signs	\$ 105
	ID# CK#			
	ID# CK#			
	ID#			ļ
	CK#			
	ID# CK#			
	ID#			
	CK#			
	ID# CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$ 105.13
			TOTAL (if last page of this schedule)	\$ 1,212.66

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	2	of	2
		· ·	

FOR INSTRUCTIONS, SEE BACK OF FORM

(Mus	COMMITTEE NAME(Must be same as on Statement of Organization)	of FOR City COUNCIL
	i be sa	10

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

PART II - MONETARY LOAN REPAYMENTS MADETHIS REPORTING PERIOD (Loans forgiven must be reported on Schedule $E \cdot \ln kind$ Contributions)

☐ CHECK THIS BOX IF AMENDING FORM

LOANS RECEIVED & REPAID

(Rev. 08/96)

SCHEDULE

TO CANDIDATE: REPAID	S	· · · · · · · · · · · · · · · · · · ·					s	sa.
(include Endorser's Name, If Applicable) TO C							TOTAL CASH REPAYMENTS (PART II)	From Schedule E TOTAL LOANS FORGIVEN
(MM/DD/YR)								Fr
AMOUN! OF LOAN	မှ	150-		150			00	
reLATIONSHIP TO CANDIDATE (II Applicable*)		SAME		SAME			300.	
(Include Endorser's Name, If Applicable)	GARY L. WinterhoF 1220 WASHINGTON	CECHAL FAILS IN SOURS	GARY L. WINTERHOF 120 WASHINGTON	CEDAR FALLS ITA SOU13			TOTAL (PART I)	
RECEIVED (MM/DD/YR)	924/		10/10/					•

'Disclosure law requires candidate committees to disclose the retationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguintly (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If sumanne of contributor is the same as candidate, but there is no familial relationship, unter "not applicable" in the relationship column when it applies.

Page of (for Schedule F)

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD